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PTO/SB/50 (02-01)
Approved for use through 01/31/2004. OMB 0651-0033
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1050 US. PTO 109/9757 18

REISSUE PATENT APPLICATION TRANSMITTAL Attorney Docket No. Address to: First Named Inventor **Assistant Commissioner for Patents** Original Patent Number **Box Reissue** Original Patent Issue Date Washington, DC 20231 (Month/Day/Year) Express Mail Label No. **APPLICATION FOR REISSUE OF:** Plant Patent Design Patent Utility Patent (Check applicable box) **ACCOMPANYING APPLICATION PARTS APPLICATION ELEMENTS (37 CFR 1.173)** Statement of status and support for all changes Fee Transmittal Form (PTO/ SB/ 56) 10. (Submit an original, and a duplicate for fee processing) to the claims. See 37 CFR 1.173 (c). Applicant claims small entity status. See 37 CFR 1.27. Original U.S. Patent for surrender Specification and Claims in double column copy of patent Ribboned Original Patent Grant format (amended, if appropriate) Statement of Loss (PTO/SB/55) Drawing(s) (proposed amendments, if appropriate) Foreign Priority Claim (35 U.S.C. 119) Reissue Oath/Declaration (original or copy) (if applicable) (37 C.F.R. § 1.175) (PTO/SB/51 or 52) Information Disclosure Copies of IDS 13. Citations Statement (IDS)/PTO-1449 Power of Attorney English Translation of Reissue Oath/Declaration Original U.S. Patent currently assigned? |X | Yes (if applicable) (If Yes, check applicable box(es)) Written Consent of all Assignees (PTO/SB/53) **Preliminary Amendment** 37 C.F.R. § 3.73(b) Statement Return Receipt Postcard (MPEP 503) (PTO/SB/96) 16. (Should be specifically itemized) CD-ROM or CD-R in duplicate, Computer Program (Appendix) 17. Other: 8. or large table Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary) Computer Readable Form (CFR) b. Specification Sequence Listing on: i ☐ CD-ROM (2 copies) or CD-R (2 copies); or ii 🔲 paper Statements verifying identity of above copies 18. CORRESPONDENCE ADDRESS or Correspondence address below Customer Number or Bar Code Label Name Address 5 4 1 Zip Code City State Country Telephone Registration No. (Attorney/Agent) 1. Leas NAME

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6021770 Bow stabilizer

PTO/SB/17 (11-00) Approved for use through 10/31/2002. OMB 0651-0032

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Application Number Filing Date for FY 2001 First Named Inventor Examiner Name Patent fees are subject to annual revision. Group Art Unit TOTAL AMOUNT OF PAYMENT Attorney Docket No.

METHOD OF PAYMENT	FEE CALCULATION (continued)				
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES				
indicated fees and credit any overpayments to:	Large Small				
Deposit Account	Entity Entity	Fee Paid			
Number	Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	ree raiu			
Deposit Account Name	105 130 205 65 Surcharge - late filing fee or oath				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status.	139 130 139 130 Non-English specification				
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. Payment Enclosed: Check Credit card Money Other	112 920° 112 920° Requesting publication of SIR prior to Examiner action				
Check Credit card Order Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action				
	115 110 215 55 Extension for reply within first month				
1. BASIC FILING FEE	116 390 216 195 Extension for reply within second month				
Large Entity Small Entity Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within third month				
Code (\$) Code (\$) Fee Paid	118 1,390 218 695 Extension for reply within fourth month				
101 710 201 355 Utility filing fee	128 1,890 228 945 Extension for reply within fifth month				
106 320 206 160 Design filing fee	119 310 219 155 Notice of Appeal				
107 490 207 245 Plant filing fee	120 310 220 155 Filing a brief in support of an appeal				
	121 270 221 135 Request for oral hearing				
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 355	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional				
Fee from Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)				
Total Claims 4.2 -20" = 28 x = 252	143 440 243 220 Design issue fee				
Independent 9 - 3" = 5 x 40 = 200	144 600 244 300 Plant issue fee				
Claims Multiple Dependent	122 130 122 130 Petitions to the Commissioner				
	123 50 123 50 Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity	126 180 126 180 Submission of Information Disclosure Stmt				
Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)				
103 18 203 9 Claims in excess of 20 102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filling a submission after final rejection (37 CFR § 1.129(a))				
104 270 204 135 Multiple dependent claim, if not paid	149 710 249 355 For each additional invention to be				
109 80 209 40 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$) 452	Other fee (specify)				
*or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				

SUBMITTED BY				Complete (#	applicati	9)	
Name (Print/Type)	TamacHileas	Registration No. (Attorney/Agent)	34372	Telephone	80	28%	4157
Signeture	James M. Con	**************************************		Date	9	26	01
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